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CONFIRMATION NO. 1854

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|---|---|--------------------------------------|--|---|
| <b>SERIAL NUMBER</b><br>10/009,476  | <b>FILING OR 371(c)<br/>DATE</b><br>12/11/2001<br><b>RULE</b>   | <b>CLASS</b><br>424                  | <b>GROUP ART UNIT</b><br>1615  | <b>ATTORNEY<br/>DOCKET NO.</b><br>2260/50666                        |
| <b>APPLICANTS</b><br>Toshio Kasama, Tokyo, JAPAN;<br>Mitsuru Noto, Toyama, JAPAN;<br>Susumu Oguro, Toyama, JAPAN;<br>Isao Hanazome, Tokyo, JAPAN;<br>Rena Tatekawa, Toyama, JAPAN;  |   |                                      |  |   |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/JP00/04226 06/28/2000   |   |                                      |  |   |
| <b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 11/183345 06/29/1999  |   |                                      |  |   |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED</b><br><b>** 11/12/2004</b>  |   |                                      |  |   |
| Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged<br>Examiner's Signature _____ Initials _____ |   | <b>STATE OR<br/>COUNTRY</b><br>JAPAN | <b>SHEETS<br/>DRAWING</b>  | <b>TOTAL<br/>CLAIMS</b><br>11<br><b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>Crowell Moring<br>1001 Pennsylvania Avenue NW<br>Washington ,DC 20004-2595  |   |                                      |  |   |
| <b>TITLE</b><br>OPHTHALMIC OINTMENTS FOR TREATING INFECTIVE EYE DISEASE   |   |                                      |  |   |
| <b>FILING FEE<br/>RECEIVED</b><br>890   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                                      | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of<br>time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |